

ISSUE CLASSIFICATION	
Class	Subclass

PATENT NUMBER

O.I.P.E.	O.G. PUBLICATION DATE	REISSUE PATENT DATE
SCANNED <i>AS</i> 3 Q.A. _____	<i>7/2/2002</i>	

APPLICATION NO. 10/052528	CONT/PRIOR D	CLASS 604	SUBCLASS 192	ART UNIT 3763	EXAMINER Rodriguez
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## APPLICANTS

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Needle point safety cap assembly

# TITLE

PTO-2040  
12/99

**SURRENDER OF ORIGINAL PATENT** \_\_\_\_\_ (Exr. Initials) **ORIGINAL PATENT NUMBER** \_\_\_\_\_

[illegible]

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>		<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____  <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Assistant Examiner) (Date)		<b>NOTICE OF ALLOWANCE MAILED</b>	
	_____ (Primary Examiner) (Date)		<b>ISSUE FEE</b>	
			Amount Due	Date Paid
<b>FINAL SPRE REVIEW</b>			<b>ISSUE BATCH NUMBER</b>	
_____ (INITIALS)	_____ (Legal Instruments Examiner) (Date)			

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